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CONFIRMATION NO. 7452

<b>SERIAL NUMBER</b> 10/820,299	<b>FILING OR 371(c) DATE</b> 04/09/2004 <b>RULE</b>	<b>CLASS</b> 280	<b>GROUP ART UNIT</b> 3616	<b>ATTORNEY DOCKET NO.</b> 81094717 (202-0564)	
<b>APPLICANTS</b> Tor Vopn Eichwald, Goteborg, SWEDEN;					
<b>** CONTINUING DATA *****</b> NONE DD					
<b>** FOREIGN APPLICATIONS *****</b> EUROPEAN PATENT OFFICE (EPO) 03008559.1 04/14/2003 DD					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/19/2004					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u>		<b>STATE OR COUNTRY</b> SWEDEN	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> 022844					
<b>TITLE</b> Seat belt device					
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		